U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amende J. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U-13705

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name DENNY RANDOLPH	Name IBEW LOCAL UNION 72
	Labor Organization File Number 035-889
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any 1813
Street DANE DRIVE	Street ORCHARD LANE
City HEWETT	City WACO
State Texas ZIP Code + 4 76643-3867	State Texas ZIP Code + 4 76705-3303
5. Position in labor organization. JATC INSTRUCTOR / DIRECTOR	
Enter appropriate data below if, during the past fiscal year, you or your spo (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests usions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizations.	derived income or other economic benefit of on represent.
6. Name and address of Employer (including trade raime, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
P.O. Box, Bldg., Room No., if any	7.b. Amount.
P.O. Box, Blog., Room No., if any	7.b. Amount.
P.O. Box, Blog., Room No., if any Street	7.b. Amount.
P.O. Box, Blog., Room No., if any Street City State ZIP Code + 4	7.b. Amount.
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Sign 15. Signature and verification. The undersigned declares, under penalty of	nature Perjury and other applicable penalties of the law, that all of the information ring documents), has been examined by the signatory and is, to the best of the
P.O. Box, Blog., Room No., if any Street City State ZIP Code + 4 Sign 15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany)	nature Perjury and other applicable penalties of the law, that all of the information ring documents), has been examined by the signatory and is, to the best of the